

Name of Person Filing: _____
 Your Address: _____
 Your City, State, Zip code: _____
 Your Telephone Number: _____
 ATLAS Number (if applicable): _____
 Representing ☐ Self (Without an Attorney) OR
 Attorney for ☐ Petitioner OR ☐ Respondent

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

 (Name of Petitioner)

Case No. _____

APPLICATION AND AFFIDAVIT FOR DEFAULT

 (Name of Respondent)

NOTICE: THIS IS AN IMPORTANT COURT DOCUMENT. When this document is properly completed and filed, Default has been applied for and entered. The Default will be effective ten (10) days after the filing of this completed document, unless the Defendant/Respondent files an Answer/Response or otherwise defends before the ten day period expires.

STATE OF ARIZONA)
 County of Maricopa) ss.

1. I am the Petitioner in this court case. I understand and make the following statements under oath. I give notice that I am requesting entry of default against the other party, the Respondent, because the Respondent has **not** filed an Answer/Response.
2. Service of the court papers on Respondent has been accomplished as follows: (check **ONLY** one box)

☐ The Respondent has signed an **"Acceptance of Service"** and has accepted service of the **"Summons,"** Complaint or Petition and other papers. The Respondent has **not** filed an **"Answer/Response"**, or otherwise appeared or defended in this court case. Default may be entered.

OR

☐ I have served the Respondent according to law with the **"Summons,"** Complaint or Petition and other papers. Respondent has **not** appeared, answered, responded or otherwise defended in the time required by law.
3. The Respondent is either **not** in the active military service of the United States or has otherwise waived his/her rights under the Service Members Civil Relief Act (formerly "Soldiers and Sailor's Civil Relief Act").
4. By completing the Certificate of Mailing or Delivery at the bottom of this form, I certify that I am mailing or delivering a copy of this Application and Affidavit to the Respondent as notice that I have applied for default and default has been entered in this court case.
5. Check all boxes that are true:

☐ I have mailed a copy of this Application and Affidavit to the Defendant/Respondent at his/her last known address, **AND**

Case No. _____

- ☐ **IF** I know the Respondent, who I claim to be in default, is represented by an attorney, I have **also** mailed a copy of this Application and Affidavit to that attorney, **OR**
- ☐ I have **not** mailed a copy of this Application and Affidavit to the Respondent because I do **not** know his/her location or whereabouts and do not believe the Respondent is represented by an attorney. **(You can only check this box, if the Respondent was served by publication.)**

Note: If the Respondent fails to file a responsive pleading or otherwise defend in this action within **10 days** of the filing of this Application, a default judgment will be entered. The Plaintiff or Petitioner must still attend the default hearing at the court.

Petitioner Signature (sign in front of Notary Public)

SUBSCRIBED AND SWORN to before me this _____ day of _____,

by _____

Notary Public

My Commission Expires:

CERTIFICATE OF MAILING OR DELIVERY

On (date) _____ copy of this document was: (check ONLY one box)

☐ mailed postage pre-paid, OR ☐ delivered by _____ (name of person who did the delivery) to the Defendant/Respondent at the following:

Address: _____

Signed: _____